

Testimony for SB962

To Whom It May Concern:

My name is Travis Atkinson, and I am a behavioral health consultant, a licensed counselor, and a lifelong advocate for people struggling with mental illness. I am pledging my fervent support for SB962.

In my fifteen-year career in behavioral health care, I have seen firsthand the devastating effects of the uncoordinated mental health and substance abuse treatment systems. Frontline admissions coordinators at crisis homes and halfway houses have historically passed off an individual with complex needs like a hot potato, saying a person has too many unresolved mental health issues for a substance abuse treatment program, or has too many unresolved addiction issues to be served in a mental health crisis residential home.

While providers have long understood the complexity of individuals with a co-occurring disorder, only recently have their governing systems begun to make meaningful changes to policy and legislation. This bill is a prime opportunity for progressive change in our treatment system that will benefit the persons served. From my experience working in Crisis Residential Units across Michigan and now consulting with similar programs nationally, I see the value in a co-occurring capable programs, and Michigan has the opportunity to follow states like North Carolina and Virginia in their ability to provide both mental health and substance abuse treatment under one roof of crisis residential services.

Knowing that many people with either a substance use disorder or a mental illness suffer from both conditions, the treatment environments must be considerate, compassionate, and capable of providing co-occurring capable programming.

The next time you go to your local pharmacy, imagine trying to pick up your multiple prescriptions, only to have the pharmacist tell you she cannot distribute more than one form of medication at a time, and you were left trying to choose which of your life ailments were most pressing to treat right now. Individuals with co-occurring disorders presenting to a Crisis Residential Unit face a similar challenge, but this bill will bring more opportunities for integrated, co-occurring care to best help the person in crisis.

Regards,

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